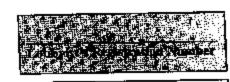
LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

Instructions

- Print in ink or type.
- Complete form and return with \$110 registration fee to the Board of Ethics, 2415 Quail Dr., 3rd Floor, Baron Rouge, LA 70808, (225) 763-8777 or (800) 842-6630.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January

1.	NAME_	Cormier Last	F	irst -	MI	ļ	10 00		
2.	BUSINES	SPHONE	(22 <u>5)</u> 761 <u>5007</u> Area Code and	Phone Number					- · · ·
3.	BUSINE	SS ADDRESS	P. O. Box 462 Street and No.	5 Baton Cit	Rouge	<u>LA 708:</u> State	Zip		
	MAILIN	IG ADDRESS	BATTER Street and No.	Cit	yy	State	Zip	2005 JAH 27	0.000 0.000 5.000
4	, EMPLO	YER <u>self</u>	emp l oyed _	<u> </u>	·				ADDITION OF THE PROPERTY OF TH
		YER'S ADD	Street an	•	State	Žip	_ 	9: 59	Ř <u>A</u>
	organi (d) wbs	ration you repr other or not the	resent; (c) the type of the client or someone else	or organizations which y spiness each is engaged in pays you to lobby. The Admonttation	you represent; (or the purpose	b) the address e or function o	of each suc f the organi	ih perso zation o	n, group, or or group:
		Address44	12 Europe St. B	aton Rouge, LA 708	302	-	-	-	
	1	Business or pu	rpose <u>volumeary</u>	har association					
	1	Does this perso	опрау уоч? <u> Үев</u>						
		If No, who pay	ys you?		<u> </u>			- 	



FOR OFFICE USE ONLY Postmark Date: 01/27/05 Pen. 2005 J#25157 JU00.00117

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HAND DELIVERED

LOBBYING REGISTRATION FORM



ATTACH 2" x 2" PHOTOGRAPH HERE

2.	Name Association for Clinical Social Work	 -
	Address 5329 Dijon Dr. Ste. 105, Baton Rouge, LA 70808	 ·
	Business or purpose <u>social workers association</u>	
	Docs this person pay you? Yes .	
	If No, who pays you?	 .
3.	Name Entergy Corporation	
	Address P. O. Box 2431, Baton Rouge, LA 70821	_ -
	Business or purpose <u>energy entity</u>	
	Does this person pay you?	
	If No, who pays you?	_ _
4.	Name Louisians Hospital Association	<u></u>
	Address 9521 Brookline Ave., Baton Rouge, LA 70809	
	Business or purpose association of hospitals	
	Does this person pay you? Yas.	
	If No, who pays you?	 .
	CERTIFICATION OF ACCURACY	
I	hereby certify that the information contained herein is true and correct to	the best of my knowledge
iı	nformation, and belief, and that no information required by the Lobbyist Discl	osure Act [LSA-R.S. 24:50 e
	eq.] has been deliberately omitted.	
	Signature of Lobbyist	ATTACH 2" x 2"

Form 800, Rev. 10/2002

DBBYING REGISTRATION FORM



5. :	х х	Name The Alchemind Group J
		Address 5517 Moss SIDE Lang, Baton Rouge, LA 70808
		Business or purpose Association concerned with progressive politics
		Does this person pay you? Yes
		If No, who pays you?
6.	ặ .	Name LA Property Owners Rights Association
		Address P. O. Box 759, Gonzales, LA 70707
		Business or purpose Association of property owners in Louisiana
		Does this person pay you? <u>Yes</u>
		If No, who pays you?
7.	ætos	Name Global Elections Systems, Inc.
		Address 605 O'Neill Dr., Jamestown, NC 272B2
		Business or purpose election systems company
		Does this person pay you? Yes
		If No, who pays you?
		CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act (LSA-R.S. 24:50 et seq.] has been deliberately omitted.

ATTACH 2" x 2" PHOTOGRAPH HERE